

ENTRY-LEVEL COURSE REGISTRATION FORM

Course (<i>check one</i>) ____ Introduction to Navy Financial and Managerial Accounting ____ Introduction to Navy Working Capital Fund ____ Principles of Navy Budgeting		COURSE DATE: _____ LOCATION: _____
NOMINATING ACTIVITY (Address and Office Code)	DSN & Commercial Phone Numbers: _____	
TRAINING OFFICE POINT OF CONTACT	DSN & Commercial Phone Numbers: _____	
PLEASE TYPE OR WRITE LEGIBLY		
Name	_____	
SSN, Series, Grade*	_____	
Email Address: (Required)	_____	
Office Phone and FAX: (DSN & Commercial)	_____	
<p align="center">CONFIRMATION WILL BE FORWARDED 2 WEEKS PRIOR TO CLASS START DATE.</p> <p>§ If student is from an activity other than the nominating activity, please provide the address and phone number. Please provide all information to ensure full consideration.</p> <p>§ Notify the course coordinator of any need for special accommodations, i.e., wheelchair access, sign language interpreter, reader, etc.</p> <p>§ Submission of a nomination does not guarantee acceptance into a class. Submit your nomination early to increase your chance of acceptance to a class.</p> <p align="center">_____ Date Signed Signature Supervisor/Training Office Print or Type Name</p>		
Questions? Call NFMC: (850) 452-3972/77 FAX: DSN 922-3821 or (850) 452-3821		

- If the information requested above is **INCORRECT** or **INCOMPLETE**, NFMC cannot guarantee acceptance into classes. Your SSN and the information requested is in accordance with Executive Order 9397, to keep records correctly-other people may have the same name.